

2001 UNIFORM BUSINESS REPORT (UBR)

31

FILED

Apr 12, 2001 8:00 am
Secretary of State

03-28-2001 90208 045 ****61.25

DOCUMENT # N00000002062

1. Entity Name

HEART WELLNESS CENTER, Inc.

Principal Place of Business

101 W. Venice Av.
Suite 31-1
Venice, FL 34285

Mailing Address

101 W. Venice Av.
Suite 31-1
Venice, FL 34285

2. Principal Place of Business

101 W. VENICE AV

Suite, Apt. #, etc.

SUITE 31-1

City & State

VENICE, FL

Zip

34285

Country

USA

3. Mailing Address

101 W. VENICE AV

Suite, Apt. #, etc.

SUITE 31-1

City & State

VENICE, FL

Zip

34285

Country

USA

DO NOT WRITE IN THIS SPACE

38361

4. FEI Number

59-3634489

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROY MUSICK

871 VENETIAN BAY BLVD.

SUITE 360

VENICE, FL 34292

7. Name and Address of New Registered Agent

Name

GREGORY R. SHANIKA

Street Address (P.O. Box Number is Not Acceptable)

101 W. VENICE AV

SUITE 31-1

City

VENICE

FL

Zip Code

34285

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Gregory R. Shanka

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/18/01

DATE

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing

Trust Fund Contribution. ☐

\$5.00 May Be

Added to Fees

Make Check Payable to:

Department of State

10. OFFICERS AND DIRECTORS

TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☒ Addition
NAME	CHAIRMAN / PRESIDENT
STREET ADDRESS	GREGORY R. SHANIKA
CITY-ST-ZIP	101 W. VENICE AV, SUITE 31-1 VENICE, FL 34285
TITLE	☐ Change ☒ Addition
NAME	VICE CHAIRMAN
STREET ADDRESS	John Kleinbaum, Ph.D.
CITY-ST-ZIP	3900 Clark Rd. Sarasota, FL 34241
TITLE	☐ Change ☒ Addition
NAME	TREASURER
STREET ADDRESS	PEGGY DAVIDSON
CITY-ST-ZIP	1009 KINGS COURT VENICE, FL 34293
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Gregory R. Shanka

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/01

Date

941-488-1877

Daytime Phone #

CR2E037 (11/00)